

LAUNDRY LIST FOR MILITARY PERSONNEL For use of this form, see AR 210-130; the proponent agency is DCS, G-4.					DATE		
LAST NAME - FIRST NAME - MIDDLE INITIAL <i>(Please print)</i>							
GRADE		MARK			BUNDLE NUMBER		
COMPANY							
ORGANIZATION				STATION			
BUNDLE				HANGER			
QTY	ARTICLE	IN	OUT	QTY	ARTICLE	IN	OUT
	BAG	<input type="checkbox"/>	<input type="checkbox"/>		COAT, BDU	<input type="checkbox"/>	<input type="checkbox"/>
	BELT	<input type="checkbox"/>	<input type="checkbox"/>		COAT, UTILITY	<input type="checkbox"/>	<input type="checkbox"/>
	BRASSIERE	<input type="checkbox"/>	<input type="checkbox"/>		JACKET, FIELD	<input type="checkbox"/>	<input type="checkbox"/>
	CAP, BDU	<input type="checkbox"/>	<input type="checkbox"/>		SHIRT, SS	<input type="checkbox"/>	<input type="checkbox"/>
	CLOTH, WASH	<input type="checkbox"/>	<input type="checkbox"/>		SHIRT, LS	<input type="checkbox"/>	<input type="checkbox"/>
	COAT, PAJAMA	<input type="checkbox"/>	<input type="checkbox"/>		SKIRT	<input type="checkbox"/>	<input type="checkbox"/>
	DRAWERS	<input type="checkbox"/>	<input type="checkbox"/>		SLACKS	<input type="checkbox"/>	<input type="checkbox"/>
	DRAWERS, WOOL	<input type="checkbox"/>	<input type="checkbox"/>		TROUSER, BDU	<input type="checkbox"/>	<input type="checkbox"/>
	HANDKERCHIEF	<input type="checkbox"/>	<input type="checkbox"/>		TROUSER, JEAN	<input type="checkbox"/>	<input type="checkbox"/>
	PANTIES	<input type="checkbox"/>	<input type="checkbox"/>		TROUSER, UTILITY	<input type="checkbox"/>	<input type="checkbox"/>
	SHIRT, T	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
	SHORTS, R&A	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
	SLIP	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
	SOCKS, BLACK	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
	SOCKS, WOOL	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
	TROUSER, PAJAMA	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
	TOWEL, BATH	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
	TOWEL, HAND	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
THE STATEMENT BELOW MUST BE READ AND SIGNED BY PATRON The Government will receive and consider claims from patrons for loss of or damage to the items listed herein if such loss or damage occurs while the items are in the possession of the Government. Claims should be submitted by the patron to the laundry officer as soon as practicable and be accompanied by the laundry slip. Experience indicates that missing items are most often recovered if claims are submitted within two weeks after the patron becomes aware that items are missing. The contents herein do not exceed authorized piece limitations and are the personal property of the undersigned.							
SIGNATURE OF PATRON							
LISTER		CHECKER		MARKER		BUNDLER	

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